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Remarks:

In re application of

Thomas W. Smith

Attorney Docket No.: 79544

Serial No.: 10/658,896

Filed: September 10, 2003

For: READ-ONLY BASELINE WEB SITE : Examiner: Philip J. TO WHICH CHANGES ARE MADE VIA

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: Art Unit: 2153

Chea

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE a collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction Act of 1995, no persons are required to respond to Application Number 10/658,896 Filing Date TRANSMITTAL September 10, 2003 First Named Inventor **FORM** Thomas W. Smith 2153 **Examiner Name** Philip J. Chea (to be used for all correspondence ofter initial filing) Attorney Docket Number Naw Case 79544 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC ✓ Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition (Appeal Notice, Brief, Repty Brief) Amendment/Reply Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request below): Notice of Appeal Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Notice of Appeal to March 10, 2008 Final Rejection (2 p) Extension of Time • 2 months (1 p) Reply to Missing Parts/ Incomplete Application Fee Transmittal (1 p) Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Naval Surfac<u>e W</u>arfare Center - Dahlgren Division Signature Printed name Gerhard \ . Thielman Reg. No. Date August 11, 2008 43,186

CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature Deborah G. Blakley Date August 11, 2008

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Under the Paperwork Reduction Act of 1995 no persons are regulred to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/658,896 Application Number TRANSMIT Filing Date September 10, 2003 For FY 2008 Thomas W. Smith First Named Inventor Examiner Name Philip J. Chea Applicant claims small entity status. See 37 CFR 1.27 Art Unit TOTAL AMOUNT OF PAYMENT 970.00 Navy Case 79544 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify). ✓ Deposit Account Deposit Account Number: 50-0967 Deposit Account Name: NSWC Dahlgren For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide cradit card Information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES FILING FEES** SEARCH FEES Small Entity Small Entity Small Entity Fees Paid (5) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 310 210 Utility 155 510 105 255 Design 210 105 100 130 65 50 210 Plant 105 310 160 80 155 310 620 510 Reissue 155 255 310 210 0 Provisional 105 0 0 Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissues) 105 210 Each independent claim over 3 (including Reissues) 185 370 Multiple dependent claims Multiple Dependent Claims **Total Claims Extra Claims** Fee Paid (\$) Fee (\$) Fee Paid (\$) - 20 or HP = Fee (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fcc duc is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Fee (\$) Total Sheets Extra Sheets 150 =(round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2-mo Ext of Time Fee Code 1252 (\$460): Ntc Appl Fee Code 1401 (\$510) 970 SUBMITTED BY Registration No. 43,186 ^{Тејерћопа} (540) 653-8061 Signature

Date August 11, 2008 Name (Print/Type) Gerhard W.

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